

15 APR 20 AM 11:40

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

FRIENDS OF CHRIS MCDANIEL

ADDRESS (number and street)

POST OFFICE BOX 125



Check if different than previously reported. (ACC)

LAUREL

MS

39441

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C C00550657

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

MS

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y Y Y

01 / 01 / 2015

through

M M / D D / Y Y Y Y Y Y

03 / 31 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer MELANIE SOJOURNER

Signature of Treasurer MELANIE SOJOURNER

Date

04 / 15 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3
(Revised 02/2003)

FE5AN018

15020159732

SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

FRIENDS OF CHRIS MCDANIEL

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y
0	1		0	1		2	0	1	5	

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y
0	3		3	1		2	0	1	5	

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))...	0.00	2582761.27
(b) Total Contribution Refunds (from Line 20(d)) ..	0.00	43254.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	0.00	2539507.27
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	0.00	2316285.97
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	300.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...	0.00	2315985.97
8. Cash on Hand at Close of Reporting Period (from Line 27)...	0.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)...	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)...	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 9

Write or Type Committee Name

FRIENDS OF CHRIS MCDANIEL

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2015

To:

MM / DD / YYYY
03 / 31 / 2015

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A)...

(ii) Unitemized

(iii) TOTAL of contributions
from individuals .

(b) Political Party Committees...

(c) Other Political Committees
(such as PACs)...

(d) The Candidate

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

0.00
0.00
0.00
0.00
0.00
0.00
0.00

1361058.37
1124068.30
2485126.67
0.00
97634.60
0.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the
Candidate...

(b) All Other Loans...

(c) TOTAL LOANS
(add Lines 13(a) and (b))...

0.00
0.00
0.00

100100.00
0.00
100100.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..

0.00

300.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

0.00

623077.52

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...

0.00

3306238.79

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 9

II. DISBURSEMENTS

COLUMN A Total This Period

COLUMN B Election Cycle-to-Date

17. OPERATING EXPENDITURES...

0.00

2316285.97

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES ..

0.00

0.00

19. LOAN REPAYMENTS:

(a) Of Loans Made or Guaranteed
by the Candidate...

5792.80

0.00

(b) Of All Other Loans

0.00

0.00

(c) TOTAL LOAN REPAYMENTS
(add Lines 19(a) and (b))...

5792.80

0.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees ...

0.00

43254.00

(b) Political Party Committees...

0.00

0.00

(c) Other Political Committees
(such as PACs)...

0.00

0.00

(d) TOTAL CONTRIBUTION REFUNDS
(add Lines 20(a), (b), and (c))...

0.00

43254.00

21. OTHER DISBURSEMENTS

2389.81

838692.89

22. TOTAL DISBURSEMENTS

(add Lines 17, 18, 19(c), 20(d), and 21) ►

8182.61

3198232.86

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...

8182.61

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...

0.00

25. SUBTOTAL (add Line 23 and Line 24)...

8182.61

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...

8182.61

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD
(subtract Line 26 from Line 25)...

0.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 9

☐ 17 ☐ 18 ☒ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. CHRISTOPHER BRIAN MCDANIEL

Mailing Address 506 SOUTH COURT ST

City State Zip Code
ELLISVILLE MS 39437

Purpose of Disbursement
LOAN REPAYMENT

Candidate Name

Office Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2014
☒ Primary ☐ General
☐ Other (specify)

State: MS District: 00

Date of Disbursement

M M / D D / Y Y Y Y
03 / 24 / 2015

Amount of Each Disbursement this Period

5792.80

Transaction ID : SB19A.81702

Category/
Type

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

Category/
Type

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

Category/
Type

SUBTOTAL of Disbursements This Page (optional)

5792.80

TOTAL This Period (last page this line number only)

5792.80

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 9

☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)

FRIENDS OF CHRIS MCDANIEL

Full Name (Last, First, Middle Initial)

A. RED CURVE SOLUTIONS

Mailing Address 500 CUMMINGS CENTER
SUITE 4400

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
RECOUNT-COMPLIANCE CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) Other

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2015

Amount of Each Disbursement this Period

2389.81

Transaction ID : SB21.81700

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

2389.81

TOTAL This Period (last page this line number only)

2389.81

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 7 OF 9

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.10215

FRIENDS OF CHRIS MCDANIEL

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

CHRISTOPHER BRIAN MCDANIEL

Election: 2014

☒ Primary

☐ General

☐ Other (specify) ▼

Mailing Address

506 SOUTH COURT ST

City

State

ZIP Code

ELLISVILLE

MS

39437

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

100.00

0.00

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 10 M

D 07 D

Y 2013 Y

M M M

D D D

Y 12/31/2014 Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

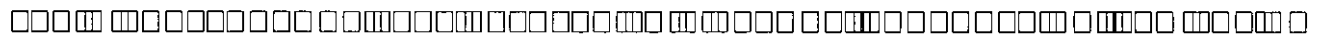
Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional).....

0.00

TOTALS This Period (last page in this line only) ..

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



Form/Schedule: **SC/10**

Transaction ID : **SC/10.10215**

(Current loan amount of 100.00 from a balance of 100.00 has been forgiven)

Form/Schedule:

Transaction ID:

15020159739

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 9 OF 9

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.10216

FRIENDS OF CHRIS MCDANIEL

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

CHRISTOPHER BRIAN MCDANIEL

☒ Primary

☐ General

☐ Other (specify) ▼

Mailing Address

506 SOUTH COURT ST

City

State

ZIP Code

ELLISVILLE

MS

39437

Original Amount of Loan

100000.00

Cumulative Payment To Date

80792.80

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 10

D 15

Y 2013

M M

D D

Y 12/31/2014

0.00

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

SUBTOTALS This Period This Page (optional)...

0.00

TOTALS This Period (last page in this line only) ...

0.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



March 18, 2015
Reports Analysis Division
Federal Election Commission
999 E Street NW
Washington, DC 20463

IDENTIFICATION NUMBER: C00550657

REFERENCE: LOAN FORGIVENESS

To Whom It May Concern:

This letter serves to state that all of my loans to the Friends of Chris McDaniel committee are forgiven. Thank you and please let me know if you have any further questions.

Sincerely,

A handwritten signature in black ink, consisting of a large, stylized "C" followed by a horizontal line that tapers off to the right.

Chris McDaniel
Candidate



Rt 729 2
10:30

2844
04:16

Extremely Urgent

4/15/2015

From: (617) 848-8887
Salm Kiehl
Red Curve Solutions
500 Cummings Center
Suite 4400
Beverly, MA 01915

Origin ID: MXGA



J151215022033w

SHIP TO: (202) 224-0322

BILL SENDER

Senate Office of Public Records
Senate Office of Public Records
232 HART SENATE OFFICE BUILDING

WASHINGTON, DC 20510

FedEx Ship Manager - Print Your Label Screened by 24

Senate Post Office

Ship Date: 15APR15

ActWgt: 0.3 LB

CAD: 105653717/NET3610

APR 16 2015

Delivery Address Bar Code



Ref #
Invoice #
PO #
Dept #
McDaniel



Only

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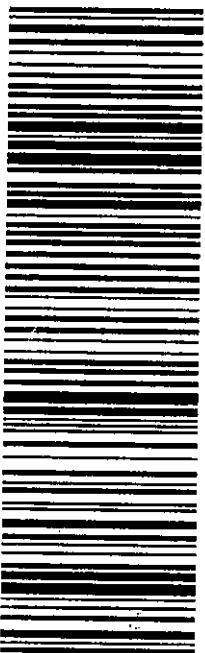
tact

TRK# 7733 7440 2844
6201

THU - 16 APR 10:30A
PRIORITY OVERNIGHT

EP YKNA

20510
DC-US
IAD



537 428F CS/EE 4B

27 65102051

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	4/15/15	<input checked="" type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

POSTMARK ILLEGIBLE ☐ POSTMARK ☐

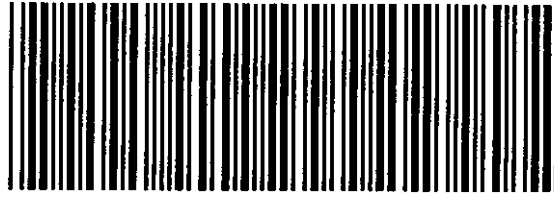
FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

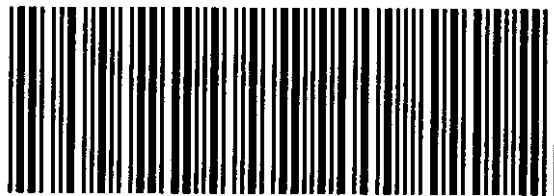
PREPARER MN DATE PREPARED 4/20/15

2/28/2015

15020159743



SEN PATCH



SEN PATCH

15020159744